PTO/SB/17 (07-06)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/624,603-Conf. #7588 Application Number **FEE TRANSMITTAL** July 23, 2003 Filing Date Koji Yoshida First Named Inventor For FY 2005 D. D. Le Examiner Name Applicant claims small entity status. See 37 CFR 1.27 2834

Applicant claims sine	il ellity status. O	00 07 01 10 1.2.		Art Offic							
TOTAL AMOUNT OF PAYMENT (\$) 120.00				Attorney Docket No.		SON-2781					
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order Other (please identify):											
X Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULATION											
1. BASIC FILING, SEARC	H, AND EXAM	NATION FE	ES		-						
•	FILING	FEES		ARCH FEES	EXAM	INATION FEES	3				
Application Type	Fee (\$)	Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fees Pa	aid (\$)			
Utility Utility	300	150	500	250	200	100		141			
Design	200	100	100	50	130	65					
Plant	200	100	300	150	160	80					
Reissue	300	150	500	250	600	300					
Provisional	200	100	0	0	0	0					
2. EXCESS CLAIM FEES	200	100	·	Ů	v	·	s	mall Entity			
Fee Description							Fee (\$)	Fee (\$)			
Each claim over 20 (include	ding Reissues)						50	25			
Each independent claim o	ver 3 (including	g Reissues)					200	100			
Multiple dependent claims	3						360	180			
Total Claims Extra	Paid (\$) Multiple Dependent Claims										
2 -20 = x = <u>Fee (\$)</u>											
HP = highest number of total cl				(4)		 -		-			
	Claims Fe	e (\$)	Fee F	Paid (\$)							
2 -3 = HP = highest number of indepe	endent claims paid f	or, if greater that	n 3.								
3. APPLICATION SIZE FE	·	or, ir ground, and						-			
If the specification and d		100 sheets o	f paper	(excluding electro	nically	filed sequence or	computer				
listings under 37 CFR					or small	entity) for each a	dditional 50				
sheets or fraction ther						F (A)	Fac De	mind (dr)			
	Extra Sheets			dditional 50 or frac			Fee Pa	110 (2)			
		/50		(round up to a who	ie numbei) ×	Foes P	aid (\$)			
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) .											
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00											
SUBMITTED BY	/// _		1	Registration No.	24 404	Talashans	(202) 055	2750			
Signature	// /			(Attorney/Agent)	24,104	Telephone	(202) 955-	.3730			

SUBMITTED BY		77	\neg	7					
Signature	/	///	7/			Registration No. (Attorney/Agent)	24,104	Telephone	(202) 955-3750
Name (Print/Type)	Ronald	7. _!	ya r	anen	·			Date	September 8, 2006

PTO/SB/22 (07-06)

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duction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number. Docket Number (Optional) PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) SON-2781 FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) 10/624,603-Conf. #7588 Filed July 23, 2003 **Application Number** SMALL VIBRATION MOTOR AND METHOD OF MANUFACTURING THE SAME Examiner D. D. Le Art Unit 2834 This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Small Entity Fee <u>Fee</u> One month (37 CFR 1.17(a)(1)) \$120 \$60 \$ 120.00 \$450 \$225 \$ Two months (37 CFR 1.17(a)(2)) Three months (37 CFR 1.17(a)(3)) \$1020 \$510 \$ \$795 \$ Four months (37 CFR 1.17(a)(4)) \$1590 Five months (37 CFR 1.17(a)(5)) \$2160 \$1080 \$ Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 18-0013 . I have enclosed a duplicate copy of this sheet. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 September 8, 2006 \$ignaturé Date Ronald P. Kananen (202) 955-3750 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. 09/11/2006 MAHMED1 00000128 180013 10624503 forms are submitted.

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